

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Change Miami-Dade Now! Inc.
Name
 (2) 2060 Biscayne Boulevard
Address (number and street)
Miami, FL 33137
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1046056]
 Submitted on:
 10/3/2012 10:49:34 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 1139

(4) **Check appropriate box(es):**
 Candidate (office sought): _____
 Political Committee **CHECK IF PC HAS DISBANDED**
 Committee of Continuous Existence **CHECK IF CCE HAS DISBANDED**
 Party Executive Committee
 Electioneering Communication **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**

(5) REPORT IDENTIFIERS

Cover Period: From 9/15/2012 To 9/28/2012 / Report Type G2-12
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00
 Loans \$ 30,000.00
 Total Monetary \$ 30,000.00
 In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1,600.00
 Transfers to Office Account \$ 0.00
 Total Monetary \$ 1,600.00

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 522,500.00

(10) TOTAL Monetary Expenditures To Date
 \$ 492,169.66

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p>X _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization)</p> <p>X _____</p> <p>Signature</p>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Change Miami-Dade Now! Inc. (2) I.D. Number 1139

9/15/2012 through 9/28/2012

(3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
9/27/2012 / /	BRAMAN, NORMAN 2060 BISCAYNE BLVD 2ND FLOOR MIAMI, FL 33137	I	automobile executive	LO			\$30,000.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Change Miami-Dade Now! Inc.

(2) I.D. Number 1139

(3) Cover Period 9/15/2012 through 9/28/2012

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
9/19/2012 / /	SUN POST, P.O. BOX 191870 MIAMI BEACH, FL 33119	print advertising	MO		\$600.00
1					
9/19/2012 / /	BOHEMIAN SOUND, INC., 216 CATALONIA AVE. #100 CORAL GABLES, FL 33134	radio advertising	MO		\$1,000.00
2					
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